

JUVENILE COURT OF MEMPHIS AND SHELBY COUNTY, TENNESSEE
616 ADAMS AVENUE
MEMPHIS, TENNESSEE 38105



Child's Name: [REDACTED]
(Last) (First) (Middle)

File No. [REDACTED]

DETENTION FEE BILL OF COST [REDACTED]

ADMIT DATE: 8/26/2014 10:24:00 PM

RELEASE DATE: 10/10/2014 9:38:17 AM

Detention Fee \$150.00 per day at 45 days = \$6,750.00

TOTAL \$6,750.00

**FULL PAYMENT IS DUE IN 30 DAYS. PARTIAL
PAYMENTS MAY BE MADE DURING THIS TIME.
FAILURE TO PAY YOUR BILL WITHIN THE
SPECIFIED TIME WILL RESULT IN GARNISHMENT
OF YOUR WAGES OR OTHER COURT ACTION.**

I certify that the foregoing statement of costs is correct.

JOY TOULIATOS
Clerk of Court

**PLEASE MAIL MONEY ORDER OR CERTIFIED
CHECK ALONG WITH THIS BILL OF COST TO:**

**JUVENILE COURT/COST
616 ADAMS AVENUE
MEMPHIS, TN 38105**

By [Signature] D.C.

Parent/Guardian Information

NAME [REDACTED]

SSN [REDACTED]

ADDRESS [REDACTED]

CITY & STATE [REDACTED]

ZIP CODE: [REDACTED]

TELEPHONE: [REDACTED]

EMPLOYER: [REDACTED]

EMPLOYER ADDRESS:

CITY & STATE [REDACTED]

ZIP CODE:

TELEPHONE:

Parent/Guardian Copy

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